

GROWING UP WITH US™...

A Newsletter For Those Who Care For Children

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©SPIRITUAL DEVELOPMENT OF CHILDREN

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Behavioral Objectives: After reading this newsletter the learner will be able to:

1. Define spirituality and religion and give 2 ways each may be expressed.
2. Discuss age-specific spiritual development with related implications for the healthcare provider.

Religious and spiritual dimensions of life are among the most important influences in many people's lives. Although used interchangeably, religion and spirituality are not the same. Religion, the formal institutional expression of one's spiritual beliefs and practices, is a part of spirituality for many. However, spirituality is a more encompassing term. It is the sense of relatedness to something greater than oneself. It is the belief in things that cannot be seen, smelled, tasted, heard, or touched. Spirituality is that which gives meaning, pleasure, satisfaction and purpose to a person's life in relation to one's self, the community, and the environment.

People express their spirituality in various ways. For some, development of their inner self through prayer, meditation, listening quietly to music, reading or enjoying art, is nurturing to their spirituality. For others, communing with nature, such as gardening, recycling, walking in the woods or sitting by the sea, may be important. Others may express their spirituality with others, such as participation in religious services, enjoying family and friends or providing service to others.

The basis of spirituality, as well as religious beliefs and traditions, are learned in childhood. This newsletter will discuss age-specific spiritual development, as well as implications for healthcare providers regarding spiritual care of the child and his or her family.



SPIRITUAL DEVELOPMENT OF CHILDREN

Children's spirituality and religious beliefs are learned from significant others in their environment, primarily from parents. The beliefs and ideals of family are more influential than those of their peers in matters of faith.

Children's cognitive level, their ability to comprehend, directly reflects their spiritual development. Development of the conscience is also strongly linked to spirituality, including learning right from wrong during childhood.

Throughout childhood the goal is to promote spiritual well-being, which includes:

- * Compassion for others
- * Appreciation of nature
- * Reverence for life
- * Capacity for unconditional love
- * Generosity
- * Socially acceptable behavior

INFANCY:

During the first year of life, the infant has no concept of right or wrong, as well as no beliefs and no convictions to guide his or her behavior.

However, the beginnings of faith are established with the development of basic trust through relationships with the primary caregiver, traditionally the mother.



TODDLER PERIOD:

Toddlerhood, 1-3 years of age, is primarily a time of imitating the behaviors of others. Spiritual practices may be observed, such as kindness to others, nurturing of pets, recycling, not littering, helping others less fortunate and/or praying before meals. Although toddlers imitate others without comprehending the meaning or significance, beginning such practices at an early age provide excellent role-modeling behaviors.

A primary way toddlers learn is through exploration of their immediate environment. During this period, adults can help young children appreciate the wonders of nature, such as finding pictures in clouds or marveling at the size of a tree in the backyard.

Toddlers behave because of the freedom or restriction that is placed on their actions. There is little, if any, concern for why something is wrong at this age. Toddlers judge whether an action is good or bad according to whether it results in reward or correction. If they are not corrected, the action is good, regardless of the meaning of the act. For example, if parents allow hitting, the toddler will perceive that hitting is good because it wasn't associated with punishment. If children are punished for it, the action is bad. Regardless of the misbehavior, toddlers, as well as children of all ages, need to know their behavior is bad, and that they are not. Additionally, unconditional love needs to be conveyed.

Because of immature thought processes, toddlers have little idea of God and religious teachings. However, routines are important to toddlers, including saying prayers at bedtime or before meals, if this is the families' preference.

PRESCHOOLERS:

Questioning is at its peak during the preschool period, 3-6 years of age. This is an excellent time for parents to help the child to think about the power of something greater than oneself. Asking the child thought provoking questions, such as, "How does the sun rise?"; "Where does the moon hide during the day?"; "Why is it raining?"; "Why are the clouds moving?" and "Why is the ocean in constant motion?", are helpful in fostering spiritual development at this stage.



During the preschool years, children begin to internalize the values and beliefs of their parents. Children follow parental beliefs as part of the daily lives, rather than through an understanding of their basic concepts.

Preschoolers have a concrete conception of a God with physical characteristics who is often treated like an imaginary friend. If exposed to simple Bible stories they are able to understand them, as well as to memorize short prayers. Religious concepts must be presented to them in concrete terms. Preschoolers benefit from concrete representations of religious practices, such as Bible picture books and small statues, such as those of the Nativity scene. Being taught the meaning of religious traditions, such as Christmas or Chanukah, aids in the development of spirituality.



Observing religious traditions practiced at home, such as prayers before meals or bedtime, can help children through stressful periods, including illness and hospitalization. However, preschoolers expect their prayers to always be answered, which can be quite confusing when that doesn't happen.

At this age, children are learning right from wrong and behave correctly to please adults, as well as to avoid punishment. Wrongdoing often provokes feelings of guilt. When adults give children positive alternatives for misbehavior, the child's spirituality is nurtured. For example, explaining to a 4 year old, "Rather than pushing your little sister when she's in your way, I'd like for you to walk around her." Parental actions also convey to children what they consider good and bad behavior. For example, if a preschooler overhears a parent tell a telemarketer, "I'm sorry, but my husband's not home" and he is, that behavior can do great harm. As the saying goes, "actions speak louder than words".

Preschoolers often misinterpret illness as punishment for real or imagined transgressions. Although this may not be verbalized, it is helpful to reassure the child what they did or thought did not cause their illness or any other situation.

SCHOOL-AGERS:

Through the school-age years spiritual development parallels cognitive development and is closely related to children's experiences and social interactions.

School-agers begin to behave according to socially acceptable norms. And, their developing conscience during this period bothers them when they disobey. Young school-agers can understand rules and what they are supposed to do, but they don't understand the reasons behind them. With older children rules become less absolute, and are likely to be tested.

School-age children still think in concrete terms, but are avid learners and have a great desire to learn about their environment and religion. They picture their God as human and are fascinated by heaven and hell. School-age children begin to learn the difference between the natural and supernatural.

School-age children are often comforted by prayer or other religious rituals, and if these activities are a part of their daily lives, they can help children cope with threatening situations. However, their prayers tend to be for very tangible rewards. As children get older they begin to realize that prayers are not always answered.



Most schools have a Christian orientation toward holidays and values. This may result in conflict and discomfort for children of other religious groups.

MEETING SPIRITUAL NEEDS:

For many, spirituality gives purpose and meaning to life and how it is expressed varies from individual to individual. Healthcare providers also have their own unique and personal beliefs and understanding of spirituality. Awareness of personal values and any biases will help you avoid appearing insincere, insensitive or judgmental.

Assessing and meeting the spiritual needs of children of all ages, and their families, is an essential component of providing holistic care. Assess the child's environment for religious articles, such as the Bible, rosary beads, a cross. Observe if the child and family engage in religious rituals, such as prayer, or receive visits from clergy or other spiritual leaders.

Among many religious groups, illness, injury and/or death is believed to be punishment for sin.

Some may express a fatalistic attitude stating it is "the will of God". Others may view health challenges as a test of strength and strive to remain faithful. Children will rarely voice a need for spiritual support. However, listen closely for indirect references, such as "God doesn't care what happens to people".

Because spiritual and religious beliefs are personal, if at all possible, a trusting relationship should be established with the parent and child before spiritual care is implemented. Spiritual care focuses on activities that support a person's belief system, such as respecting the child and family's privacy during religious rituals. Spiritual care also includes helping patients express themselves, including what is important and pleasurable to them, as well as the meaning of a particular physical or life crisis. Listening and providing nonjudgmental support during illness and crises is also important. If the patient requires more spiritual attention than the healthcare provider is able to provide, a referral should be made. For example, parents should be asked whether they want a clergy member present, either their own or a hospital chaplain, or another support person called.

Spiritual care does not mean offering your religious or spiritual beliefs even if they are intended to be comforting. For example, saying such phrases as, "I'm sorry. God must have needed another angel" or "It's God's will", or "Now she's at one with the universe", are not appropriate. However, if the healthcare provider is comfortable joining a family in their prayer, that is certainly appropriate.



It's important to keep in mind that a child and his or her family

may not practice any form of organized religion, yet may be quite spiritual.

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